

ISSUE SLIP STAMP AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	NW	71534	C8-03-99 51-132
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW		M011	2/20/99

9/13/99

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final	1/13
Original	4/25
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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